

Statement of Dissolution



FORM

(Rev. 06/10)

DR-3 STATEMENT OF DISSOLUTION

For Office Use Only

Comm. # _____
Indexed _____
Audited _____
Computer _____
Certified Date of Dissolution _____

Effective January 1, 2010, this form must be filed electronically by most state committees. Effective January 1, 2011, this form must be filed electronically by most local committees. Please check with the Board to see if you are required to file it electronically. Independent expenditure committees must file this form electronically.

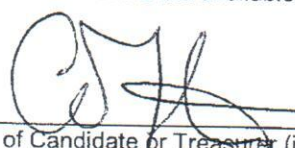
COMMITTEE TO ELECT CURE FLORIDA	
Official Name of Committee	
1785 Madison Ave	
Street	
FORT DOSSIE TX 50501	
City, State, Zip Code	
(515) 570-9600	
Area Code	Telephone

WHEN TO FILE:

The Statement of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee has been filed.

For state candidates and state PACs, a final bank statement must be filed with the Statement of Dissolution or as soon as possible if the bank statement is not available at the time the Statement of Dissolution is filed.


Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)
12/28/2012
Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

Board Address: 510 E 12th Street Ste 1A, Des Moines, IA 50319

Fax Number: 515-281-4073